

SCREENING CONNECTIONS FOR LTSS SCREENERS

September 2021

Presented by the Division for Aging and Disability Services

DMAS-DADS

LTSS Screening and AE&D Program Staff



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Reminders

- All Screening questions or requests go to:
ScreeningAssistance@dmas.Virginia.gov
- Please do not use individual emails of the Screening Team unless you are already working on a specific case. All initial request emails need to go to ScreeningAssistance.

PowerPoints from Screening Connection Calls

Posted on the DMAS
Website Under:

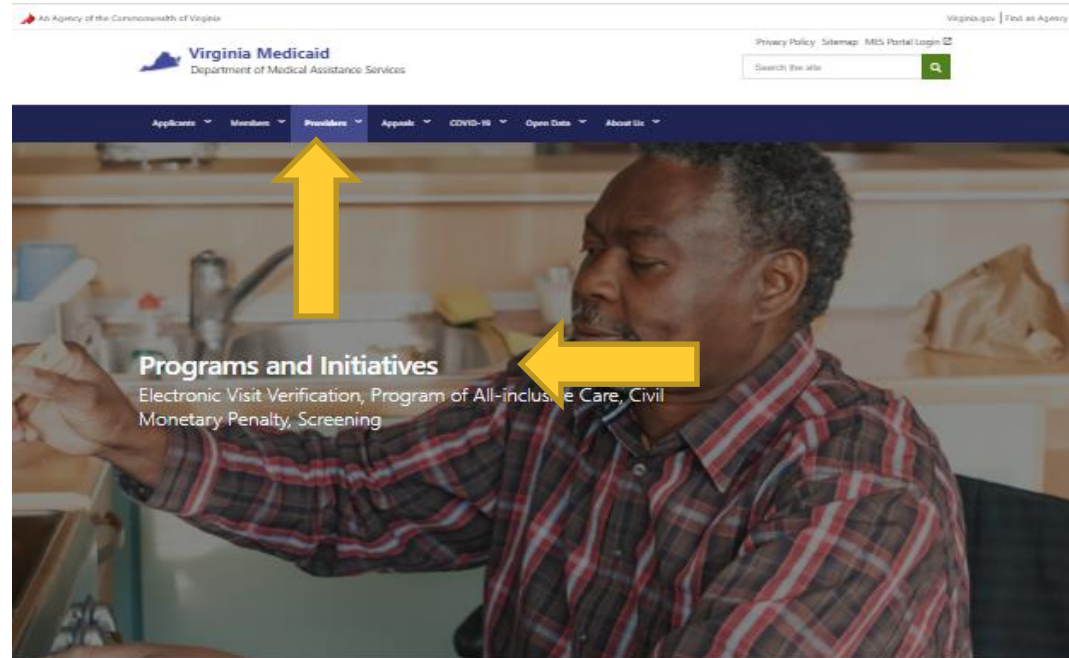
Providers

Long Term Care:

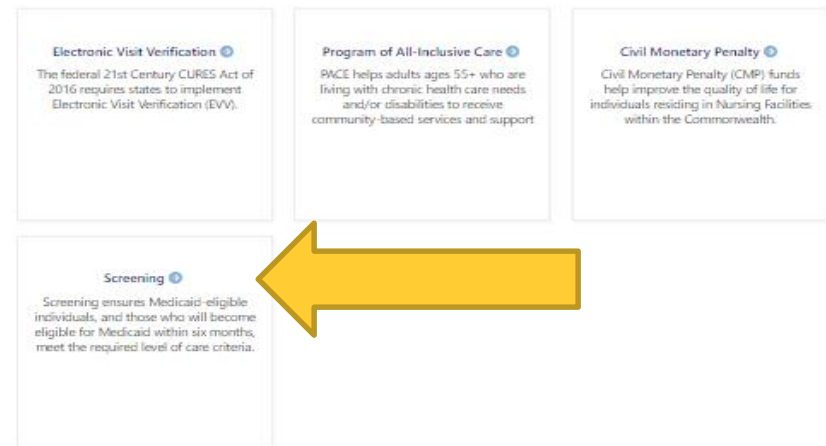
<https://www.dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/>

SCREENING FOR LTSS

look down the page for
Screening Connection call
information



Resources - Programs and Initiatives



Today's Agenda

- Quiz Time!
- Frequent Questions

Pop Quiz Time!

- ❑ The COVID-19 Flexibilities end:
 - a. September 19, 2021
 - b. December 31, 2021
 - c. Will not end and will continue
 - d. Have already ended

- ❑ If someone has never been a Medicaid member, the LTSS Screening does not create a Medicaid ID #?
True or False

- ❑ The LTSS Screening is used to determine if someone meets level of care criteria for which of the following:
 - a. CCC Plus Waiver
 - b. EDCD Waiver
 - c. DD Waiver
 - d. Assisted Living Facilities

Pop Quiz

- ☐ A LTSS Screening used for NF admission can also be used for:
 - a. Enrollment into the CCC Plus Waiver
 - b. Enrollment into PACE
 - c. Admission to an ALF
 - d. Enrollment into the CCC Plus Program

- ☐ A Medicaid Member can have multiple SSNs and Medicaid IDs?
True or False

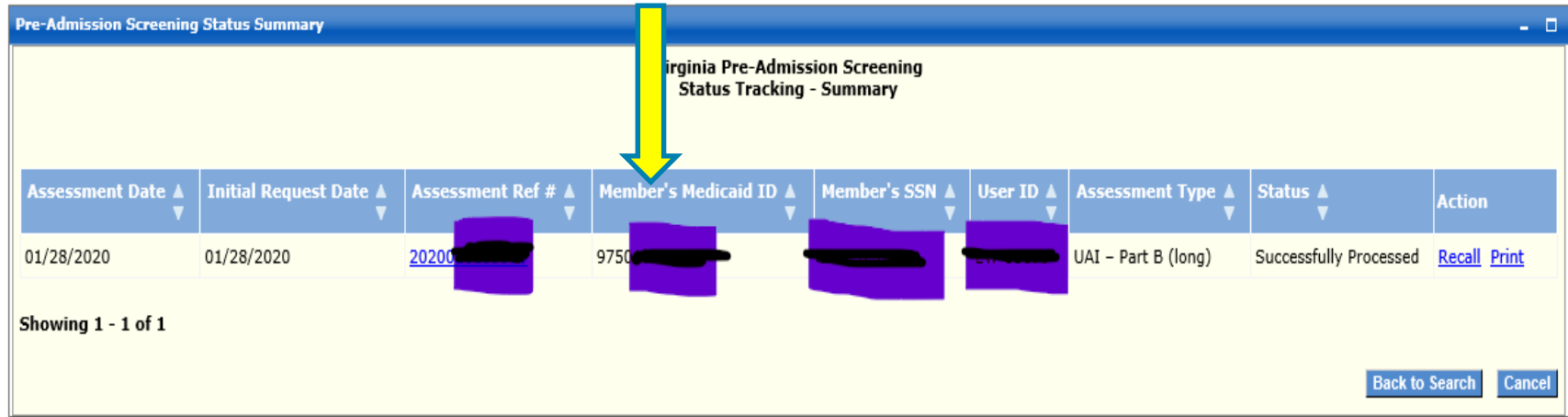
- ☐ Who must sign a revised Medicaid LTSS Screening after an appeal that rules for the appellant?
 - a. the Hearing Officer
 - b. the appellant
 - c. The Screener
 - d. A Physician

COVID-19 Flexibilities

Have Ended!

- Everything should be back to routine processes for the LTSS Screening and NF admissions
 - Medicaid Memo, June 30, 2021: COVID Flexibilities Update – Expiration of State PHE on 6/30/2021
 - Additional information at <https://www.dmas.virginia.gov/for-providers/general-information/emergency-waivers/>
- *At this time, DMAS does not have authority from the Governor's office or CMS to waive any regulatory requirements in relation to the LTSS Screening or PASRR. The administration is monitoring COVID trends and DMAS will support any flexibilities deemed necessary by the administration.*

How to Find the Medicaid ID in ePAS?



Pre-Admission Screening Status Summary

Virginia Pre-Admission Screening Status Tracking - Summary

Assessment Date ▲▼	Initial Request Date ▲▼	Assessment Ref # ▲▼	Member's Medicaid ID ▲▼	Member's SSN ▲▼	User ID ▲▼	Assessment Type ▲▼	Status ▲▼	Action
01/28/2020	01/28/2020	20200[REDACTED]	9750[REDACTED]	[REDACTED]	[REDACTED]	UAI - Part B (long)	Successfully Processed	Recall Print

Showing 1 - 1 of 1

[Back to Search](#) [Cancel](#)

Once a screener submits a screening record with no Medicaid ID, the system generates a Medicaid ID. The ID can be found when returning to the system and searching for the person. It is one of the items listed for this person and screening.

Anytime a person who is screened is found NOT to have a Medicaid ID, the computer system will generate one for the person. This generated Medicaid ID becomes the official Medicaid ID. It is to be used in relation to Virginia Medicaid whether the person is determined eligible or not.

What is the Purpose of the LTSS Screening ?

- Assess whether an individual meets the Virginia Medicaid level of care requirements (care which would require nursing facility admission – NF LOC) written in law for long term services and supports (LTSS). 12VAC30-60-303

The LTSS Screening answers the question:

- “ Does this person need the level of care that would be offered in a NF and can this person be enrolled for services provide by the CCC Plus Waiver, PACE or a NF?”

The person is Authorized or Not Authorized for enrollment.

- LTSS Offered in a NF
- CCC Plus Waiver
- PACE



- The LTSS Screening is not for determining specific services or quantity of services.

*The LTSS Screening is not used for determining eligibility for other programs/services such as ALF or DD waivers.

How do I determine if a LTSS Screening Packet is valid?

Successfully Processed

Screenings that are authorized and those not authorized can be successfully processed by the computer.

YES, AUTHORIZED

Status: Successfully Processed

Medicaid Funded Long-Term Care Service Authorization Form

1. Member Information

Last Name: [REDACTED] First Name: [REDACTED] Birth Date: [REDACTED]
Social Security: [REDACTED] Medicaid ID: [REDACTED] Sex: [REDACTED]

2. Medicaid Eligibility Information

Is Individual currently Medicaid eligible?: YES

Is Individual currently Auxiliary Grant eligible?: NO

Dept of Social Services:
Eligibility Responsibility: [REDACTED]
Services Responsibility: [REDACTED]

3. Pre-Admission Screening Information (to be completed only by Level I, Level II or ALF screeners)

Medicaid Authorization

Medicaid Services Authorized?: YES
Reason No Medicaid Services Authorized: [REDACTED]

Level of Care: NURSING FACILITY (NF) SERVICE
Targeted Case Management for ALF?: [REDACTED]
ALF Reassessment Completed?: [REDACTED]
ALF Provider Name: [REDACTED]
ALF Provider Number: [REDACTED]

Look for form with this title.

When you see "Successfully Processed" it means the Screening PASSED ALL OF THE COMPUTER SYSTEM EDITS

Under item number 3, Medicaid Services Authorized YES, means the person met the level of care required to be eligible for NF, CCC Plus waiver or PACE.

NO, NOT AUTHORIZED

Status: Successfully Processed

Medicaid Funded Long-Term Care Service Authorization Form

FORM [REDACTED]

1. Member Information

Last Name: [REDACTED] First Name: [REDACTED] Birth Date: [REDACTED]
Social Security: [REDACTED] Medicaid ID: [REDACTED] Sex: [REDACTED]

2. Medicaid Eligibility Information

Is Individual currently Medicaid eligible?: YES

Is Individual currently Auxiliary Grant eligible?: NO

Dept of Social Services:
Eligibility Responsibility: [REDACTED]
Services Responsibility: [REDACTED]

3. Pre-Admission Screening Information (to be completed only by Level I, Level II or ALF screeners)

Medicaid Authorization

Medicaid Services Authorized?: NO
Reason No Medicaid Services Authorized: [REDACTED]
OTHER SERVICES RECOMMENDED: [REDACTED]
Level of Care: [REDACTED]
Targeted Case Management for ALF?: [REDACTED]
ALF Reassessment Completed?: [REDACTED]
ALF Provider Name: [REDACTED]
ALF Provider Number: [REDACTED]
ALF Admit Date: [REDACTED]

Look for form with this title.

When you see "Successfully Processed" this means the Screening PASSED ALL OF THE COMPUTER SYSTEM EDITS

Under item number 3, Medicaid Services Authorized NO means the individual does not meet the required level of care. They are NOT eligible for NF, CCC Plus waiver or PACE.

Information provided in the LTSS Screening should be consistent. If the DMAS-96 has 'YES' for Medicaid Authorization then the DMAS-97 (and any other forms) should show that the individual meets NF LOC.

Are LTSS Screenings Interchangeable?

LTSS Screening that authorizes:

LTSS in a
NF

- Can be used for PACE, but must also meet additional PACE criteria
- Can be used for CCC Plus waiver

CCC Plus
Waiver *

- Can be used for PACE
- Can be used for NF Enrollment;
however, NF must complete PAS for MI, ID or related condition

PACE

- *If Medicaid financial eligibility is met*
- Can be used for CCC Plus Waiver
- Can be used for NF enrollment

* CCC Plus waiver with PDN are unique circumstances and must be consider on a case by case basis.

Do I have to request a void if there are errors in the screening and it has already been Successfully Processed?

VOID

- Yes
- The Medicaid LTSS Screening isn't just paperwork. Medicaid requires that no one receive services/payment for services unless the person is deemed to need the care AND it is documented.
- Computer systems working in Virginia Medicaid check against the database for screenings. If a screening is marked as not meeting criteria, then the person canNOT obtain Medicaid support and NO one but the LTSS Screener and physician can change that determination.
- All of the information in the screening must be consistent, otherwise Medicaid fraud could be suspected.

Do I have to request a void if there are errors in the screening and it says denied or incomplete?

- No
- You can search for a screening and if it is listed as “Denied” or “Incomplete”, you may recall and make modifications as needed.
- DMAS does NOT monitor status of Denials or Incompletes. You must monitor this yourself and recall as needed.

Status: Incomplete

Status: Denied

Are LTSS Screenings complete and successfully processed as soon as it is submitted?

Status: Successfully Processed

- No.
- It usually takes 24 hours to process a LTSS Screening.
- You MUST return to the screening system (ePAS) and confirm that the Screening Successfully Processes.
- Successful Processing is not the same as Authorization.

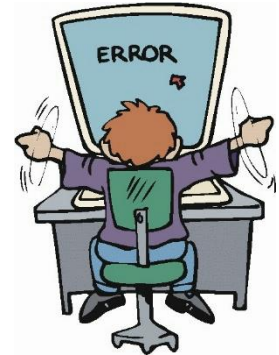
Isn't name and DOB all I need when requesting a void?

- No.
- DMAS Screening Staff need:
 - NAME,
 - SSN,
 - MEDICAID ID,
 - SCREENING NUMBER and
 - REASON for the requested void.
- This information must be sent with a request for void to ScreeningAssistance@dmass.Virginia.gov

The email **MUST** be sent securely! Remember you are working with protected personal health information (PHI)!

VOID Involving Auto-Filled Items

DMAS LTSS Screening works with Virginia Medicaid Financial Eligibility/Enrollment on any auto fills that are wrong. Wrong auto fills occur because the original Medicaid Records may have erroneous information which must be reviewed and resolved.



We are now using a **required form** to resolve these issues. If you have an auto fill problem please contact ScreeningAssistance@dmass.Virginia.gov for the form.

DMAS will provide the form which you must complete and return to ScreeningAssistance@dmass.Virginia.gov for audit records.

- Must provide individual's Name, SSN and Medicaid ID # (correct information as well as wrong information)
- Must identify what is used as the source of information
 - SS card must match with the requested change information
 - *Verbal acknowledgement by individual or family is not verification

Please return the form as a Word document attachment vs cutting and pasting it into the email.

What do you mean by continuity of care in relation to an LTSS Screening?

- Generally, if a person had a valid LTSS Screening prior to enrollment for LTSS and then wants to change providers or settings, there should be continuous care. When one type of LTSS ends, the next should begin.

COC

- Examples:
 - 1) A person no longer wants to use consumer direction for their waiver services and chooses to change to agency directed.
As long as this person **remains enrolled in CCC Plus Waiver** a new LTSS Screening is not needed because this is continuity of care.
 - 2) A person may go from CCC Plus Waiver, to NF , then returns to CCC Plus waiver ...
a LTSS Screening is NOT required as long as the CCC Plus waiver is reinitiated within 30 days from the discharge from the NF. This is considered continuity of service.

Is a UAI the same as the LTSS Screening?

It is very important to use the correct terminology to avoid confusion

- While the UAI (**Uniform Assessment Instrument**) is a big part of the LTSS Screening process, they are NOT one and the same
- The UAI is used by multiple agencies, not just DMAS
- The UAI is the tool to assess an individual's ability to complete tasks of daily living (ADLs), IADLs and document medical or nursing needs.
- The LTSS Screening includes other aspects of screening for Medicaid LTSS enrollment not included in the UAI.
- The LTSS Screening determines whether an individual meets Nursing Facility (NF) Level of Care (LOC) criteria.
- The screening team is authorizing the ENROLLMENT and use of Medicaid funds to pay for Long Term Services and Supports needed by the individual.

Is a LTSS Screening and the Level I & Level II PreAdmission Screening the same?

- **No.** Level I and Level II refer to the federally mandated PAS (PreAdmission Screening for MI/ID and RC) process required for individuals seeking NF admission.
 - The **PASRR** - Pre-Admission Screening and Resident Review- process is designed to screen, evaluate and monitor individuals for suspected Mental Illness (MI), Intellectual Disability (ID), or RC (Related Conditions)
- The Goal of the PAS Screenings is to ensure that individuals with MI, ID or RC disabilities are identified and get appropriate Services & Supports
- Individuals **MUST** have a Level I/ Evaluation and a Level II/ Evaluation and Determination (if needed) Screening **PRIOR** to admission to a Nursing Facility
- Absent documentation of those screenings, the NF will NOT be paid

The PAS process occurs concurrently with the LTSS Screening for NF enrollments for Medicaid members; however, it is a separate process guided by Federal Laws. The state of Virginia **MUST** follow Federal laws and CMS protocols regarding PASRR.

Anyone who is **NOT** a Medicaid member, or who is living in the community utilizing Medicaid LTSS, who is being enrolled into a NF **MUST** still have a PAS for MI, ID and RC. In these cases, it is the NF that must complete the full PAS process, Level I and Level II, and maintain the documentation that this Federal requirement has been met for all NF enrollments.

Institutional Long Term Care

Intermediate Care Facilities

Nursing Facilities

Preadmission Screening and Resident Review

Inpatient Psychiatric Services for Individuals Under Age 21

Individuals Age 65 or Older in an Institution for Mental Diseases

Preadmission Screening and Resident Review

Preadmission Screening and Resident Review (PASRR) is a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care. PASRR requires that Medicaid-certified nursing facilities:

1. Evaluate all applicants for serious mental illness (SMI) and/or intellectual disability (ID)
2. Offered all applicants the most appropriate setting for their needs (in the community, a nursing facility, or acute care settings)
3. Provide all applicants the services they need in those settings

Does an LTSS Screening have to be done for admission to an ALF or group home?

Does an ALF or group home qualify for a NF LOC?

- No, a LTSS Screening is not conducted for ALF admission or group homes.
- LTSS Screening is done for individuals to determine if they may require NF Level of Care (LOC).
- LTSS Screening is used for the CCC Plus Waiver, PACE or Nursing Facilities
- The criteria for ALF and group home services are different from criteria for Nursing Facility Level of Care (NF LOC)
- An Assisted Living Facility (ALF) does not require someone to meet NF LOC so an LTSS Screening is NOT required for admission to an ALF.
- ALF and Group homes usually do require completion of a UAI (NOT the LTSS Screening)

Do I have to revise a LTSS Screening that has been appealed?

- **Yes** if the ruling is that the LTSS Screening is wrong and rules in favor of the “Appellant”.
- Appeals now allow the submission of additional information prior to or at the appeal hearing and this new information must be considered.
- You must contact ScreeningAssistance@dmas.Virginia.gov requesting a void due to appeal and follow the process flowchart attached to this presentation.

Does the appeal process procedures apply to hospital and NF LTSS Screeners?

- YES!
- You are required by law to inform individuals of their appeal rights both at the time of screening (DMAS-97) and in the Authorization Denial Letter that must be sent to individuals. You must follow the attached revised sample as some wording is legally required. The revised letters for Authorization and Denial are now posted on the Virginia Medicaid portal.
- You are legally required to respond to the appeals office. If you receive notification from the DMAS Appeals office you must follow their instructions including completing appeal summaries.

Quiz Answers!

- ❑ The COVID-19 Flexibilities end:
 - a. September 19, 2021
 - b. December 31, 2021
 - c. Will not end and will continue
 - d. Have already ended

- ❑ If someone is NEW to Medicaid, the LTSS Screening does not create a Medicaid ID #?
True or False

- ❑ The LTSS Screening is used to determine if someone meets level of care criteria for which of the following:
 - a. CCC Plus Waiver
 - b. EDCD Waiver – this name is retired and should no longer be used – yes we know it still shows up in computer systems and on forms but after April 2022 it will be gone!
 - c. DD Waiver
 - d. Assisted Living Facilities

Pop Quiz

- ❑ A LTSS Screening used for NF admission can also be used for:
 - a. Enrollment into the CCC Plus Waiver
 - b. Enrollment into PACE – as long as all other PACE criteria are met
 - c. Admission to an ALF
 - d. Enrollment into the CCC Plus Program

- ❑ A Medicaid Members can have multiple SSNs and Medicaid IDs?
True or False: If you find someone with two SSNs or Medicaid IDs this must be corrected or the person's Medicaid records will not link correctly and the person could be denied services.

- ❑ Who must sign a revised Medicaid LTSS Screening after an appeal that rules for the appellant?
 - a. the Hearing Officer
 - b. the appellant
 - c. The Screener
 - d. A Physician



LTSS Screening Connection

NEXT CALL

October 12, 2021



You have homework! If you have questions regarding these slides, and want answers reviewed on the next call, please submit those questions with

Subject Line: Questions for Screening Connection
and submit to:

ScreeningAssistance@dmas.Virginia.gov

by October 5!

Join Us!